

## WATER DIVISION, PUBLIC WORKS DEPARTMENT 6101 SE Johnson Creek Blvd Milwaukie OR 97206 503.786.7600

building@milwaukieoregon.gov

## Hydrant Meter Application

## **SITE INFORMATION:**

Job Site Address:		Map & Tax Lot(s):			
Hydrant Used For:	Construction	Landscaping		Tank Truck	
Hydrant Location:					
RESPONSIBLE PARTIES:					
APPLICANT:	Project Contact	Contractor		Other	
Contact Name:		Company:			
Phone(s):		Email:			
Mailing Address:		Zip:		CCB#:	
Phone(s):		Email:			
DECLARATION BY APPI	LICANT:				
actual cost for any damage imparted, repairs or replacement needed to the fire hydrant, or meter, as result of my/our use. I/we understand the inherent danger of using fire hydrants, and I/we shall indemnify and save harmless the City of Milwaukie from all claims or damages resulting from the use of said hydrant. The meter will be made available for reading every month. Failure to do so may result in the termination of hydrant use  Applicant's Signature  Date:					
	FOR OFFIC	E USE ONLY			
	METER INF	ORMATION:			
Meter Size:	Meter Read Start	Meter Read Start:		Meter Read Final:	
Serial #:	Start Date:		Return D	Date:	
Backflow Assembly Serial #	<b>†:</b>	Make/Model:		Type:	
Hydrant Wrench? Y 🗌 / N	Chapman Valve	\$ A □ \ N □	Section	of Hose? Y 🗌 / N 🔲	
\$2,250.00 REQUIRED DEPOSIT FOR HYDRANT METER, VALVE, WRENCH  Deposit must be paid prior to issuing meter.					
Deposit Paid by:					
Address:		Receipt #:		Date:	
Refunded to:		Check #:		Date:	
Address:		Refund Amount:	Refund Amount:		